

02-14-05  
**PART B - FEE(S) TRANSMITTAL**

Complete and send this form, together with applicable fee(s), to: **Mail** **Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
or **Fax** **(703) 746-4000**

**INSTRUCTIONS:** This form should be used for transmitting the **ISSUE FEE** and **PUBLICATION FEE** (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

27479 7590 11/15/2004

**COCHRAN FREUND & YOUNG LLC**

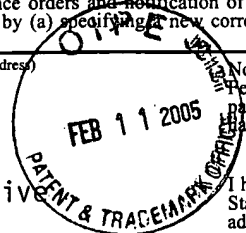
~~3555 STANFORD ROAD~~ 2026 Caribou Drive

~~SUITE 230~~ Suite 201

FORT COLLINS, CO 80525

02/15/2005 MBERHE1 00000006 10614946

01 FC:2501 700.00 OP  
02 FC:1504 300.00 OP  
03 FC:8001 30.00 OP



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
-----------------	-------------	----------------------	---------------------	------------------

10/614,946

07/03/2003

Andrew Cohen

SPAT.01USU1

9072

TITLE OF INVENTION: SYSTEM AND METHOD FOR CACHING AND RENDERING IMAGES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
-------------	--------------	-----------	-----------------	------------------	----------

nonprovisional

YES

~~\$685~~ \$700

\$300

~~\$985~~  
\$1,000

02/15/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
----------	----------	----------------

TUNG, KEE M

2676

345-501000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Cochran Freund & Young LLC

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Spatial Data Technologies, Inc.

Fort Collins, Colorado

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1491 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

William W. Cochran

Date

11 Feb 05

Typed or printed name

Registration No.

26,652

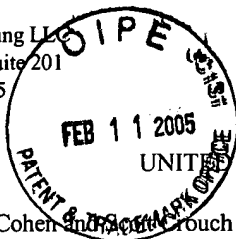
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Cochran Freund & Young LLC  
2026 Caribou Drive, Suite 201  
Fort Collins, CO 80525

Patent Issue Fee

DOCKET NO.: SPAT.01USU1



IN THE  
UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Andrew Cohen and Chad Laszlo

Application No.: 10/614,946

Examiner: Tung, Kee M.

Filing Date: July 3, 2003

Group Art Unit: 2676

Title: SYSTEM AND METHOD FOR CACHING AND RENDERING IMAGES

Mail Stop ISSUE FEE  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

- ( ) Response/Amendment ( ) Petition to extend time to respond  
( ) New fee as calculated below ( ) Supplemental Declaration  
( ) No additional fee (Address enveloped to "Box Non-Fee Amendments")  
(X) Other: **Issue Fee Transmittal**

CLAIMS AS AMENDED BY SMALL ENTITY						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEES
TOTAL CLAIMS		MINUS		=	X \$25	\$
INDEP. CLAIMS		MINUS		=	X \$100	\$
[ ] FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM					+ \$180	\$
EXTENSION FEE	1ST MONTH \$60	2ND MONTH \$225	3RD MONTH \$510	4TH MONTH \$795	\$	
				TOTAL FEE		

(X) Attached is a check for \$1,030.00.

( ) Please charge to Deposit Account 50-1491 the amount of \$\_\_\_\_\_.

(X) At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 50-1491 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 50-1491 under 37 CFR 1.19, 1.20 and 1.21. **A duplicate copy of this sheet is enclosed.**

I hereby certify that this correspondence is being deposited with the United States Postal Service as:

[X] "Express Mail Post Office to Addressee" service under 37 CFR 1.10.

"Express Mail" label no.: EV 669055708 US

in an envelope addressed to:

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450, Alexandria, VA 22313-1450**

Date of Deposit: February 11, 2005

Signature: \_\_\_\_\_

Typed Name: Chad Laszlo

Respectfully submitted,

By: \_\_\_\_\_

William W. Cochran  
Attorney/Agent for Applicant(s)  
Reg. No.: 26,652

Telephone No.: (970) 377-6363

Date: February 11, 2005